Attorr	ney Docket No.	F-5801	The Co
First I	nventor	Daniel F. Bischof, et al.	u
Title	METHODS AND S	SYSTEMS FOR PREPARING BLOO	OD 5

Express Mail Label No. (Only for new nonprovisional applications under 37 CFR 1.53(b)) EL 845496723US Assistant Commissioner for Patents APPLICATION ELEMENTS ADDRESS TO: Box Patent Application Washington, DC 20231 See MPEP chapter 600 concerning utility patent application contents. Fee Transmittal Form (e.g., PTO/SB/17) CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) Applicant claims small entity status. 8. Nucleotide and/or Amino Acid Sequence Submission See 37 CFR 1.27. (if applicable, all necessary) (preferred arrangement set forth below)

- Description: " 3. [X Computer Readable Form (CRF) - Descriptive title of the invention Specification Sequence Listing on: - Cross Reference to Related Applications i. CD-ROM or CD-R (2 copies); or - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, paper or a computer program listing appendix Statements verifying identity of above copies - Background of the Invention - Brief Summary of the Invention ACCOMPANYING APPLICATION PARTS - Brief Description of the Drawings (if filed) - Detailed Description Assignment Papers (cover sheet & document(s)) - Claim(s) Power of 37 CFR 3.73(b) Statement - Abstract of the Disclosure 10 Attorney (when there is an assignee) 11. English Translation Document (if applicable) 4. X. Drawing(s) (35 U.S.C. 113) [Total Sheets Copies of IDS Information Disclosure 12. [Total Pages 5. Oath or Declaration Citations Statement (IDS)/PTO-1449 13 Preliminary Amendment Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) a. Return Receipt Postcard (MPEP 503) 14 (for continuation/divisional with Box 18 completed) (Should be specifically itemized) Certified Copy of Priority Document(s) (if foreign priority is claimed) **DELETION OF INVENTOR(S)** Signed statement attached deleting inventor(s) Nonpublication Request under 35 U.S.C. 122 named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b) (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Application Data Sheet. See 37 CFR 1.76 Other: 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No. Prior application information. Group Art Unit For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 19. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label Correspondence address below (Insert Customer No. or Attach bar code label here, Michael C. Mayo Name Baxter Healthcare Corporation Fenwal Division, RLP-30 P.O. Box 490 - Route 120 & Wilson Road Address State Zip Code City 60073 Illinoios Round Lake Country USA Telephone Fax (847) 270-2658 (847) 270-2826 Name (Print/Type) Kolomayets Registration No. (Attorney/Agent) December 5, 2001 Signature

Burden Hour Statement. This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231

PTO/SB/17 (10-01)

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT

(\$)	812	00.9

espond to a collection of info	rmation unless it displays a valid OMB control number.			
Complete if Known				
Application Number				
Filing Date	Herewith			
First Named Inventor	Daniel F. Bischof, et al.			
Examiner Name				
Group Art Unit				
Attorney Docket No.	F-5801			

METHOD OF PAYMENT	FEE CALCULATION (continued)				
The Commissioner is hereby authorized to charge	3. ADDITIONAL FEES				
indicated fees and credit any overpayments to:	Large Small				
Deposit Account Number 50/1039	Entity Entity Fee Fee Fee Fee Fee Description Code (\$) Code (\$)	Fee Paid			
Deposit Cook, Alex, McFarron, Manzo, Cummings	105 130 205 65 Surcharge - late filing fee or oath				
Account Name & Mehler, Ltd.	127 50 227 25 Surcharge - late provisional filing fee or				
Charge Any Add tional Fee Required	cover sheet				
Under 37 CFR 1 16 and 1.17 Applicant claims small entity status.	139 130 139 130 Non-English specification				
See 37 CFR 1.27	147 2,520 147 2,520 For filing a request for ex parte reexamination				
2. X Payment Enclosed:	112 920* 112 920* Requesting publication of SIR prior to Examiner action				
X Check Credit card Money Order Other	113 1,840* 113 1,840* Requesting publication of SIR after				
FEE CALCULATION	Examiner action				
1. BASIC FILING FEE	and the second month				
Large Entity Small Entity	116 400 216 200 Extension for reply within second month				
Fee Fee Fee Fee Description Code (\$) Code (\$) Fee Paid	117 920 217 460 Extension for reply within third month 118 1 440 218 720 Extension for reply within fourth month				
101 740 £01 370 Utility filing fee \$740.00					
106 330 206 165 Design filing fee	128 1,960 228 980 Extension for reply within fifth month				
107 510 £07 255 Plant filing fee	119 320 219 160 Notice of Appeal				
108 740 208 370 Reissue filing fee	120 320 220 160 Filing a brief in support of an appeal				
114 160 214 80 Provisional filing fee	121 280 221 140 Request for oral hearing				
	138 1,510 138 1,510 Petition to institute a public use proceeding				
SUBTOTAL (1) (\$) \$740.00	140 110 240 55 Petition to revive - unavoidable				
2. EXTRA CLAIM FEES	141 1,280 241 640 Petition to revive - unintentional				
Extra Claims below Fee Paid	· •				
Total Claims 24 -20** = 4 x 18.00 = 72.00	143 460 243 230 Design issue fee				
Independent 3 - 3** = 0 X 84.00 = 0.00	144 020 244 010 11				
Multiple Dependent 280.00 = 0.00	122 130 122 130 Petitions to the Commissioner				
1	123 50 123 50 Processing fee under 37 CFR 1.17(q)				
Large Entity Small Entity Fee Fee Fee Fee Description	126 180 126 180 Submission of Information Disclosure Stmt				
Code (\$) Code (\$)	581 40 581 40 Recording each patent assignment per property (times number of properties)				
103 18 203 9 Claims in excess of 20 102 84 202 42 Independent claims in excess of 3	146 740 246 370 Filing a submission after final rejection				
104 280 204 140 Multiple dependent claim, if not paid	(37 ČFR § 1.129(a)) 149 740 249 370 For each additional invention to be				
*109 84 209 42 ** Reissue independent claims over original patent	examined (37 CFR § 1.129(b))				
110 18 210 9 ** Reissue claims in excess of 20	179 740 279 370 Request for Continued Examination (RCE)				
and over original patent	169 900 169 900 Request for expedited examination of a design application				
SUBTOTAL (2) (\$) 72.00	Other fee (st-ecify)				
**or number previously paid, if greater; For Reissues, see above	*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)				

SUBMITTED BY			Complete (if applicable)		
1.7	drew G. Kolomayets	Registration No. (Attorney/Agent)	33,723	Telephone	(312) 236-8500
$+T_1$	rave Com	(Allomoy). Igomy		Date	December 5, 2001